

2015 Plan Review Application for a Permanent Food Service Business

(If you are proposing a mobile food business or Limited Food Service business, use the **Mobile** Plan Review Application)

Project Information

(Please Print)

❖ Service Request

Name of Business: _____
 Proposed Business Address: _____ City: _____ Zip: _____
 Was this facility previously a food service business? ☐ Yes, former name: _____ ☐ No ☐ Don't Know
 If Yes, how long has it been closed? ☐ Less the 3 months ☐ 3 mos. to one year ☐ More than one year ☐ Don't Know
 Plan to open by: _____ Proposed Number of Seats: _____
 Sewage Treatment: ☐ Sewer ☐ On-Site Septic For City of Seattle, DPD Project # _____

Plan Review Fee (see pg 2 in Plan Guide). (Make checks payable to: "SKCDPH") Fee is nonrefundable

- ☐ New Construction (includes installing a new kitchen OR re-permitting an existing kitchen that has not been used for one year or more) (\$860 base fee covers the first 4 hrs of plan review)
☐ Remodels (changes or add to an existing kitchen) (\$645 base fee covers the first 3 hrs of plan review)
☐ Multiple Permit Establishment (\$645 base fee for each separate area covers the first 3 hrs of plan review for each area)
☐ Resubmitted Plan Review (\$215.00 per hour)

Please note: plan review fees are non-refundable and plan review time beyond the base will be charged at the rate of \$215 per hour. You will pay a separate permit fee before opening.

Business Owner Information

❖ Requestor

Owner Name(s): _____
 Mailing Address: _____ City: _____ State: _____ Zip: _____
 Phone No.'s _____
 Email: _____ Fax (Optional): _____

Applicant Information (If not the business owner)

❖ Plan Check

Contact Person (Applicant or Agent) Name(s): _____
 Business Name: _____ Phone No.'s _____
 Mailing Address: _____ City: _____ State: _____ Zip: _____
 Email: _____ Fax (Optional): _____

Office Use Only

Date Submitted: _____ Risk Classification: _____ Service Request SR#: _____
 Variance SR#: _____ Permit Record PR#: _____ DPD/DPER #: _____
 Approval Date: _____ Review Time: _____ Reviewer: _____
 Notes: _____

Please submit your application to:

DOWNTOWN SEATTLE
 401 - 5th Avenue, Suite 1100
 Seattle, WA 98104
 (206) 263-9566